2010 LIMITED LIABILITY COMPANY ANNUAL REPORT

DOCUMENT# L05000074406

Entity Name: JC SOLUTIONS, LLC

FILED Jan 25, 2010 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

5086 GOLFVIEW COURT, 5086 GOLF VIEW COURT,

SUITE 1612 SUITE 1612

DELRAY BEACH, FL 33484 US DELRAY BEACH, FL 33484 US

Current Mailing Address: New Mailing Address:

P. O. BOX 88

WILKESBORO, NC 28697 US

FEI Number: 20-3221387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired (X)

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

SOLIMINI, STEVEN CARTER, JILL

18701 CÁSSANDRA POINT LANE 5086 GOLF VIEW COURT BOCA RATON, FL 33496 US DELRAY BEACH, FL 33484 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: JILL M CARTER 01/25/2010

Electronic Signature of Registered Agent Date

MANAGING MEMBERS/MANAGERS:

Title: MGRM

Name: CARTER, JAMES H

Address: 5086 GOLF VIEW COURT, SUITE 1612

City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM

Name: CARTER, JILL M

Address: 5086 GOLF VIEW COURT, SUITE 1612

City-St-Zip: DELRAY BEACH, FL 33484

Title: MGRM

Name: BARNWELL, JAMES Address: 596 MICAH'S WAY

City-St-Zip: MORAVIAN FALLS, NC 28654

Title: MGRM

Name: BARNWELL, DONNA Address: 596 MICAH'S WAY

City-St-Zip: MORAVIAN FALLS, NC 28654

Title: MGRM

 Name:
 CARTER, JAMES C

 Address:
 4309 POPPLETON AVENUE

 City-St-Zip:
 OMAHA, NE 68105

I hereby certify that the information indicated on this report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the

SIGNATURE: JILL M. CARTER MGRM 01/25/2010

receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statues.